

**COMMONWEALTH OF MASSACHUSETTS  
DEPARTMENT OF INDUSTRIAL ACCIDENTS**

**TREATMENT GUIDELINES  
EFFECTIVE JULY 1, 1993**

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**GUIDELINE NUMBER 6 - ROTATOR CUFF REPAIR  
SHOULDER**

**I. Conservative Care :**

A. Failure to improve with outpatient therapy and conservative care for the following time periods:

1. Acute case: 1 to 3 weeks; **or**
2. Erosive case: 3 to 6 months\*

\*Three months of conservative care is adequate if treatment has been continuous; six months applies to those cases in which treatment has been intermittent.

**AND**

**II. Clinical Findings:**

A. Subjective

1. Severe shoulder pain and inability to raise shoulder

**AND**

B. Objective

1. Weak or absent abduction; **and**
2. Tenderness over rotator cuff; **and/or**
3. Pain relief obtained with an injection of anesthetic for diagnostic/therapeutic trial

**AND**

C. Imaging

1. Positive findings on arthrogram, MRI, or ultrasound; or
2. Positive findings on previous arthroscopy, if performed

**III. Special Instructions :**

A. *Cervical pathology and frozen shoulder syndrome should be ruled out prior to the request.*